

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>1/7/05</u>		2 Serial/Patent # <u>10/709,048</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input type="checkbox"/>	Filing			\$
<input type="checkbox"/>	Amendment			\$
<input type="checkbox"/>	Extension of Time			\$
<input type="checkbox"/>	Notice of Appeal/Appeal			\$
<input checked="" type="checkbox"/>	Petition	1FW	9/20/04	\$ 130.00
<input type="checkbox"/>	Issue			\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/>	Maintenance			\$
<input type="checkbox"/>	Assignment			\$
<input type="checkbox"/>	Other			\$
		7 TOTAL AMOUNT OF REFUND	\$ <u>130.00</u>	
8 TO BE REFUNDED BY:				
		Treasury Check		
<input type="checkbox"/>	Overpayment	X Credit Deposit A/C #:		
<input type="checkbox"/>	Duplicate Payment	, <u>09--0458</u>		
9 NO FEE DUE (Explanation): <u>1.53(e)(2) grant. - not necessitated by applicant error</u>				
10 REASON: <input type="checkbox"/>				
11 REFUND REQUESTED BY: <input type="checkbox"/>				
TYPED/PRINTED NAME: <u>Nancy Johnson</u>		TITLE: <u>Sr. Petitions Atty</u>		
SIGNATURE: <u>Nancy Johnson</u>		PHONE: <u>571-272-3290</u>		
OFFICE: <u>Petitions</u>		*****		
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: <u>Alicea Keller</u>		DATE: <u>4/10/05</u>		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B